PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandra 2005

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further on indicated unless correcte maintenance fee notificat	d below or directed oth	g the Patent, advance or erwise in Block 1, by (a	ders and notification of m) specifying a new corres	naintenance fees w pondence address;	vill be mailed to the curren and/or (b) indicating a sep	t correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				c) Transmittel Thi	c certificate cannot be used	or domestic mailings of the for any other accompanying ent or formal drawing, must	
48500	7590 05/09/	2007	mave		tificate of Mailing or Tran		
SHERIDAN RO 1560 BROADW DENVER, CO 8	AY, SUITE 1200		I her State addr trans	reby certify that these Postal Service we seed to the Mail smitted to the USP	is Fee(s) Transmittal is beir vith sufficient postage for fi Stop ISSUE FEE address TO (571) 273-2885, on the	ng deposited with the United rst class mail in an envelope above, or being facsimile date indicated below.	
·						(Depositor's name)	
						· (Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/811,412	03/25/2004		William T. Walker		4366-148	3274	
FITLE OF INVENTION	: GLOBAL POSITION	NG SYSTEM HARDWA	RE KEY FOR SOFTWAF				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DU		
nonprovisional	NO	\$1400	\$0	\$0	\$1400	08/09/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS]	•		
ARTHUR JEANGLAUDE, GERTRUDE 3		3661	701-213000				
CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-Number is required. ASSIGNEE NAME A	ND RESIDENCE DATA	nge of Correspondence " Indication form led. Use of a Customer A TO BE PRINTED ON	or agents OR, alternation (2) the name of a single registered attorney or a registered patent attorney on the control of the c	attorney or agent) and the names of up to adapted attorneys or agents. If no name is name will be printed.			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Avaya Technology Corp. Basking Ridge, NJ Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
4a. The following fee(s) Alssue Fee Publication Fee (1)		. 4	b. Payment of Fee(s): (Plead of A check is enclosed. Payment by credit can	ase first reapply a	ny previously paid issue fe		
a. Applicant clain	ntus (from status indicatens SMALL ENTITY stat	us. See 37 CFR 1.27.			LL ENTITY status. See 37		
NOTE: The Issue Fee ar	nd Publication Fee (if req records of the United Sta	uired) will not be accepte ates Patent and Trademarl	ed from anyone other than k Office.	the applicant; a reg	sistered attorney or agent; or	the assignee or other party in	
Authorized Signature	() and	W Lwa		Date Avo	gust 3, 2007)	
Typed or printed nan	ne Douglas	W. Swar	拉	Registration	No. 37, 739		
	ed application form to the tions for reducing this bu Virginia 22313-1450. Do					and by the USPTO to process) ding gathering, preparing, and time you require to complete epartment of Commerce, P.O. er for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.